

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|----------|--------|----------|
| FEES DETERMINATION | Schum M | | 07-13-01 |
| O.I.P.E. CLASSIFIER | | 49 | 7/21/01 |
| FORMALITY REVIEW | H-S | 866 | 08-23-01 |
| RESPONSE FORMALITY REVIEW | TAP | 110 | 10-10-01 |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 + Restricted O Objected

| Claim | Date |
|----------|--------|
| Final | |
| Original | |
| 11 | 5/5/01 |
| 12 | 5/5/01 |
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| Claim | Date |
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If more than 150 claims or 10 actions
staple additional sheet here

BEST AVAILABLE COPY

10-11-01
10-11-01
10-11-01